State Miscellaneous & Industrial Members

# Retirement Benefit Election Package







# Receipt of Retirement Information Acknowledgement

888 CalPERS (or 888-225-7377) • TTY for Speech & Hearing Impaired: (916) 795-3240

# **Section 1**

When completing this form, be sure to clearly print with a ballpoint pen or type your information.

To make a correction, line through the error and initial the change.

Section 2

About You	
I have received the information and election package on the	
State second tier 1¼% at 65 retirement formulas. ☐ Yes ☐	□ No
Name (First Name, Middle Initial, Last Name)	Social Security Number
Signature	CalPERS Membership Date
Employee	
Employer	/
Date (mm/dd/yyyy)	( )  Daytime Phone of Personnel Clerk
	,
Personnel Clerk:	
The employee must read, complete, and sign this acknowled	gment in your presence and leave it with you.
You must complete the bottom portion of this form and return	n it to CalPERS at the address shown below.
You must place the member directly into the first tier if they	neet one of the following criteria.
Returning to State service after a 90-day break in emplo	yment (for service prior to August 11, 2004).
Returning to State service after having left State employ their CalPERS membership.	ment prior to August 11, 2004, and terminating
Completed their two-year State Alternate Retirement Pro	gram period.
This is not an election document.	
Statement & Signature of Employer Represe	entative
This information and election package was given to the above	re employee.
Date (mm/dd/yy) Perso	nnel Office Representative
Daytime Phone	

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#### INTRODUCTION

As a new State miscellaneous or industrial member, or a member returning to State employment after a 90-day separation (for service prior to August 11, 2004); after leaving State employment (prior to August 11, 2004) and terminating your CalPERS membership; or having completed your two-year State Alternate Retirement Program period, you were automatically enrolled in the State miscellaneous or industrial 2% at 55 retirement formula. This election package is being provided in case you want to change your enrollment to the State second tier 1¼% at 65 retirement formula.

You have two options available to you in the first 180 days from the date you begin contributing to CalPERS.

• Take no action and remain in the State miscellaneous or industrial 2% at 55 retirement formula.

• Elect the State second tier 1¼% at 65 retirement formula for all **future** State miscellaneous and industrial service.

..... or .....

# **Next Steps**

Review the enclosed Benefit Comparison Chart, member contribution information, and Service Retirement Calculation Worksheet to help you make your decision. Everyone's retirement needs are different. We recommend that you consider your retirement needs very carefully before making your decision. If you need assistance, CalPERS staff are available to assist you.

While reading this material, remember that we are governed by the California Public Employees' Retirement Law. The statements in this booklet are general. The Retirement Law is complex and subject to change. If there is a conflict between the law and this booklet, any decisions will be based on the law and not this booklet.

#### YOUR RETIREMENT FORMULA OPTIONS

#### Remain in the First Tier Formula

No action is necessary on your part to remain in the State miscellaneous or industrial 2% at 55 retirement formula. As a first tier member your decision to remain under this formula requires monthly member contributions to be deducted from your paycheck.

If you have **past** State second tier service and are interested in receiving information on converting that service to the State miscellaneous or industrial first tier formula, fill out and return the *Cost Information Request* form in this booklet. You have the right to convert your **past** State second tier service at any time before you retire, as long as you are in State employment on or after January 1, 2000 when you make the election.

# Electing the Second Tier Formula for Future Service

If you want to change your retirement formula, complete the *Election Document for State Second Tier Retirement Formula* form in this booklet and return it to CalPERS within 180 days from the date you began contributing to CalPERS. If your election is not received within 180 days, you will be considered to have made an irrevocable election to remain covered under the State miscellaneous or industrial first tier retirement formula for all current and future service with the State.

Your election to become a State second tier member does not require regular monthly member contributions to be deducted from your paycheck. Your retirement benefits are funded solely by employer contributions.

However, if you make this election, your retirement benefit payable under this formula will be **less than half** the amount that you would receive as a member under the first tier retirement formula.

The effective date of your election will be the first day of the month following receipt of your election form at CalPERS. If you elect the State second tier formula for future service, you will not receive a refund of any member contributions made while in the first tier plan.



#### BENEFIT COMPARISON CHART

State Miscellaneous or Industrial (2% at 55)

State Second Tier (11/4% at 65)

#### **Member Contributions**

If you're covered by Social Security, your contributions are 5 percent of your monthly earnings in excess of \$513. If you are **not** covered by Social Security, your contributions are 6 percent of your monthly earnings in excess of \$317.

Some State bargaining units have agreed to different contribution rates. Check with your Personnel Office for more information.

You pay no member contributions.

#### Service Retirement

### Minimum Requirements

Age 50 with five years of CalPERS service.

Age 55 with 10 years of CalPERS service, or age 50 for members with five years of credited service prior to January 1, 1985.

#### **Benefit Factors**

Age	%	Age	%	Age	%	Age	%
50	1.100	57	2.126	50	.500	58	.900
51	1.280	58	2.188	51	.550	59	.950
52	1.460	59	2.250	52	.600	60	1.000
53	1.640	60	2.314	53	.650	61	1.050
54	1.820	61	2.376	54	.700	62	1.100
55	2.000	62	2.438	55	.750	63	1.150
56	2.064	63+	2.500	56	.800	64	1.200
				57	.850	65+	1.250

# Final Compensation

Averaged over highest one or three years of salary.

Averaged over highest one or three years of salary.

Some State bargaining units have agreed to a three-year final compensation period. Check with your Personnel Office for more information.

# Adjustments to Final Compensation

For service covered by Social Security, compensation is reduced by \$133.33.

No adjustment - regardless of Social Security coverage.

#### BENEFIT COMPARISON CHART

# State Miscellaneous or Industrial (2% at 55)

# State Second Tier (11/4% at 65)

#### Option 1 Benefit

You can take a reduction to your Unmodified allowance (highest monthly retirement allowance payable) to have any member contributions remaining in your account paid to your beneficiary upon your death.

Not available for second tier service because there are no member contributions.

#### Option 2, 2W, 3, 3W, or 4 Benefit

You can take a reduction to your Unmodified allowance to provide a lifetime benefit to your named beneficiary. Same as State miscellaneous or industrial 2% at 55.

# **Disability Retirement**

#### Minimum Requirements

Five years of CalPERS service at any age.

Ten years of CalPERS service at any age (or five years of credited service prior to January 1, 1985).

#### **Benefit Factors**

1.8 percent

# 1.125 percent

#### **Disability Benefits**

If you are disabled and you have between 5.000 and 9.999 years of service credit, you will receive up to 18 percent of your final compensation (multiply 1.8 x years of service).

If you have between 10.000 and 18.519 years, you will receive up to one-third (33 percent) of your final compensation (years of service + years to reach 60 x 1.8). If you have more than 18.519 years, the one-third limit may be exceeded. However, you cannot receive more than the service retirement benefit payable at age 60.

At age 55 and older, your disability retirement benefits will be the same as your service retirement benefit.

If you had five years of service credit on January 1, 1985 and you currently have between 5.000 and 9.999 years of service credit, you will receive up to 11.250 percent of your final compensation.

If you have between 10.000 and 29.629 years of service, you will receive up to one-third (33 percent) of your final compensation. If you have more than 29.629 years, the one-third limit may be exceeded. However, you cannot receive more than the service retirement benefit payable at age 60.

At age 65 and older, your disability retirement benefit will be the same as your service retirement benefit.



# State Miscellaneous or Industrial (2% at 55)

# State Second Tier (11/4% at 65)

### **Industrial Disability**

#### State Industrial Members Only

If your disability is the result of a violent attack by an inmate or parolee, and you are an employee of the Department of Corrections, California Youth Authority, Prison Industry Authority, or Board of Prison Terms, the industrial disability benefit will be paid. There is no age or service requirement. You will receive 50 percent of your final compensation.

Same as State industrial 2% at 55.

Option 2, 2W, 3, 3W, or 4 Benefit See explanation for service retirement.

See explanation for service retirement.

# Pre-Retirement Death Benefits - Not Eligible to Retire

#### Minimum Requirements

Under age 50, regardless of years of service. Age 50 or older with less than five years of service.

Under age 55, regardless of years of service. Age 55 or older with less than 10 years of service, or under age 50 with five years of credited service prior to January 1, 1985.

#### Group Term Life Insurance

For those with less than 20 years State service, \$5,000, plus an amount equal to six months' pay (50 percent of your pay for the 12 months just before your death).

For those with 20 or more years of State service, the benefit is equal to \$5,000.

For those with less than 20 years State service, \$5,000, plus an amount equal to six months' pay (50 percent of your pay for the 12 months just before your death).

For those with 20 or more years of State service, the benefit is equal to \$5,000.



#### Basic Death Benefit

Return of member contributions plus interest.

Not available for second tier service because there are no member contributions,

..... or .....

..... a n d ......

#### BENEFIT COMPARISON CHART

# State Miscellaneous or Industrial (2% at 55)

# State Second Tier (11/4% at 65)

## Special Death Benefit

If your death is the direct result of a violent act while you were performing your official duties, your surviving spouse, registered domestic partner, or unmarried children under age 22 can receive a monthly allowance equal to 50 percent of your final compensation.

When the death was caused by external violence or physical force while on the job, and there are eligible surviving children in addition to your spouse or registered domestic partner, the benefit may be increased to a maximum of 75 percent. This benefit is payable to your surviving spouse or registered domestic partner until the death of your spouse or domestic partner, or to your unmarried children under the age of 22. To be eligible, your spouse or registered domestic partner must have been legally married to you or in a registered domestic partnership before the injury that resulted in your death.

Same as State miscellaneous or industrial 2% at 55.

State Miscellaneous or Industrial (2% at 55)

State Second Tier (11/4% at 65)

### Pre-Retirement Death Benefits - Eligible to Retire

#### Minimum Requirements

Age 50 with minimum of five years of service.

Age 55 with minimum of 10 years of service, or age 50 with five years of credited service prior to January 1, 1985.

Group Term Life Insurance

\$5,000 | \$5,000

..... a n d .....

# Option 2 Death Benefit

# (for eligible surviving spouse or registered domestic partner)

Option 2 monthly benefit, as though you had retired on the date of your death.

Same as State miscellaneous or industrial 2% at 55, except the benefit is based on the lower retirement allowance.

..... or .....

#### 1957 Survivor Benefit

#### (no eligible spouse or registered domestic partner, but minor children)

Monthly benefit equal to 50 percent of the Unmodified benefit, as though you had retired on the date of your death. Same as State miscellaneous or industrial 2% at 55, except benefit is based on the lower retirement allowance.

..... or .....

#### Basic Death Benefit

# (no eligible beneficiary for the monthly benefit or eligible beneficiary chooses the Basic Death Benefit)

Return of contributions, plus interest and six months' pay.

Six months' pay.

and six months pay.

..... or .....



#### BENEFIT COMPARISON CHART

# State Miscellaneous or Industrial (2% at 55)

# State Second Tier (11/4% at 65)

## Special Death Benefit

If your death is the direct result of a violent act while you were performing your official duties, your surviving spouse, registered domestic partner, or unmarried children under age 22 may receive a monthly benefit equal to 50 percent of your final compensation.

When the death was caused by external violence or physical force while on the job, and there are eligible surviving children in addition to your spouse or registered domestic partner, the benefit can be increased to a maximum of 75 percent. This benefit is payable to your surviving spouse or registered domestic partner until the death of your spouse, domestic partner, or your unmarried children under the age of 22. To be eligible, your spouse or registered domestic partner must have been legally married to you or in a registered domestic partnership before the injury that resulted in your death.

Same as State miscellaneous or industrial 2% at 55.

#### Post-Retirement Death Benefits

#### Option 1, 2, 2W, 3, 3W, or 4 Benefit

See service retirement.

See service retirement.

# Lump Sum Death Benefit

\$2,000.

\$2,000.

#### Survivor Continuance

# (provides continuing benefit to eligible survivor)

25 percent of the Unmodified allowance, if you are under Social Security; 50 percent if not under Social Security.

Same as State miscellaneous or industrial 2% at 55, except those under second tier prior to November 11, 1988 will continue to receive 50 percent continuance.

# State Miscellaneous or Industrial (2% at 55)

# State Second Tier (11/4% at 65)

# Cost-of-Living Adjustment (payable on all monthly benefits except 1959 Survivor Benefit)

Up to 2 percent per year compounded annually, depending on the increase in the Consumer Price Index (CPI). If the CPI registers a lower amount, the lesser is paid. This adjustment starts the second calendar year after retirement.

A fixed 3 percent per year compounded annually (not based on the Consumer Price Index). This adjustment starts the second calendar year after retirement.

# Member Home Loan Program

# Eligibility

You can receive 100 percent financing (95 percent real estate loan and 5 percent personal loan). You must have a minimum of \$2,000 in your retirement account in order to receive a personal loan. The personal loan cannot exceed 5 percent of the purchase price of the home. For more information, call (800) 874-7377.

You can receive up to a 95 percent real estate loan. The 5 percent personal loan applies only for members with contributions on deposit for service other than State second tier.



Eligibility at Time of Retirement Must retire within 120 days of your separation from employment to continue health benefits coverage.

Same as State miscellaneous or industrial 2% at 55.



# CALCULATING YOUR SERVICE RETIREMENT ALLOWANCE

To calculate your Unmodified allowance, the highest monthly retirement allowance payable, three factors are used.

- Years of service total years of service credit at retirement.
- Benefit factor based on your age at retirement (see page 4).
- Final compensation based on your highest average monthly pay rate for a
  one- or three-year period.

(Some State bargaining units have agreed to a three-year final compensation period. Check with your Personnel Office for more information.)

If you contribute to Social Security, you must reduce your final compensation by \$133.33 for service under the State miscellaneous or industrial 2% at 55 retirement formula. No adjustment is required for State second tier service. The following is a comparison of the Unmodified benefit payable under the State miscellaneous or industrial 2% at 55 and the State second tier 1¼% at 65 retirement formulas. The worksheet on the next page has space for you to estimate your retirement benefit under either formula.

#### Calculation Formula

Years of State misc.		Benefit Factor		Final Compensation		Unmodified
and/or indus. service	X	based on age	X	(minus \$133.33	=	Benefit
under this formula				if required)	(	(highest monthly
						allowance)

#### Calculation Examples

Member Retirement Age = 55 Total Years of State Service Credit = 25 years

Final Compensation = \$3,133.33 (minus \$133.33, if required)

Unmodified Benefit = \$3,000

#### Example I: State Miscellaneous or Industrial 2% at 55 Service Only

Service Credit	X	Benefit Factor	=	Percent	x	Final Comp.	=	Unmodified Benefit
25 (years)	X	.02 (2%)	=	.50 (50%)	x	\$3,000	=	\$1,500 (per month)

# Example II: State Second Tier 11/4% at 65 Service Only

Service Credit	X	Benefit Factor	=	Percent	x	Final Comp. =	Unmodified Benefit
25 (years)	x	.0075 (.750%)	=	.1875 (18.75%)	x	\$3,133.33 =	\$587.50 (per month)

#### SERVICE RETIREMENT CALCULATION WORKSHEET

# Your Benefit Calculation

Your Projected Retirement Age:	
Your Projected Total Years of State Servi	ce¹ Credit:
Your Projected Final Compensation:	- \$133 33 <sup>2</sup> (if required) = \$

I. If you remain under the State miscellaneous or industrial 2% at 55 formula:

II. If you elect the State second tier 11/4% at 65 formula:

- I. Total Unmodified Benefit 2% at 55 Formula \$\_\_\_\_\_
- II. Total Unmodified Benefit 1¼% at 65 Formula \$\_\_\_\_\_

<sup>&</sup>lt;sup>1</sup> Use only State miscellaneous and/or State industrial service.

Do not reduce your final compensation by \$133.33 for State miscellaneous or industrial 2% at 55 service not covered by Social Security. Do not adjust your final compensation for State second tier service, regardless of Social Security coverage.



# **Cost Information Request**

888 CalPERS (or 888-225-7377) • TTY for Speech & Hearing Impaired: (916) 795-3240

# **Section 1**

When completing this form, be sure to clearly print with a ballpoint pen or type your information. To make a correction, line through the error and initial the change.

# Request for Cost Information to Convert Past State Second Tier Service

I am an active State employee with past credited service in the State second tier 1½% at 65 retirement formula and request cost and election information to convert that service to the State miscellaneous or industrial 2% at 55 retirement formula.

Member Signature	Social Security Number	
Member Printed Name	Date (mm/dd/yy)	
	( )	
Birthdate (mm/dd/yyyy)	Daytime Phone	
Address		
City	State	ZIP Code

Mail to:

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# **Justification for Absence of Spouse's or Registered Domestic Partner's Signature**

888 CalPERS (or 888-225-7377) • TTY for Speech & Hearing Impaired: (916) 795-3240

This form is to be used with Election Document for State Second Tier Retirement Formula

#### **Section 1**

Please include the month, day and year for all dates as follows: mm/dd/yyyy.

# Member Information

Name of Member (First Name, Middle Initial, Last Name)	Social Security Number

Pursuant to Government Code Section 21261, the member's current spouse or registered domestic partner must be made aware of the selection of benefits or change of beneficiary made by a member. The spouse or registered domestic partner of a CalPERS member must acknowledge the submission of your *Election Document for State Second Tier Retirement Formula* form.

If a spouse or registered domestic partner's signature does not appear on one of the above-named documents, the following information must be completed by the member and submitted with the election.

election	on.							
	By checking this box, you indicate that you are not legally married or in a registered domestic partners because:							
	☐ Never married or never in registered domestic parnership.							
	☐ Divorced/marriage annulled or registered domestic partnership terminated. Date (mm/dd/yyyy)							
	☐ Widowed.  Date (mm/dd/yyyy)							
	By checking this box, you indicate that you are married or have a registered domestic partner, but your spouse or registered domestic partner did not sign this form because:							
	$\hfill \square$ You do not know and have taken all reasonable steps to determine the whereabouts of your spouse or registered domestic partner.							
	☐ Your spouse or registered domestic partner has been advised of the application and has refused to sign the acknowledgment.							
	$\square$ Your spouse or registered domestic partner is incapable of executing the acknowledgment because of an incapacitating mental or physical condition.							
	$\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ $							
	☐ Your spouse or registered domestic partner and you have executed a marriage settlement or partnership agreement that makes the community property law inapplicable to the marriage or partnership.							
Infor	mation Certification							
You he	reby certify under the penalty of perjury that the foregoing information is true and correct.							
Signatur	e of Member Date (mm/dd/yyyy)							

Mail to:

**Section 2** 

CalPERS Member Services Division • P.O. Box 942704, Sacramento, California 94229-2704

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# **Election Document for State Second Tier Retirement Formula**

888 CalPERS (or 888-225-7377) • TTY for Speech & Hearing Impaired: (916) 795-3240

#### **Section 1**

When completing this form, be sure to clearly print with a ballpoint pen or type your information. To make a correction, line through the error and initial the change.

#### **Election Document for State Second Tier Retirement Formula**

Failure to file this form within 180 days from the date you began contributing to CalPERS will be deemed an irrevocable election to remain enrolled in the State miscellaneous or industrial 2% at 55 retirement formula for all future qualifying State miscellaneous or industrial service.

To be valid, this document must be completed and forwarded to CalPERS within 180 days from the date you began contributing to CalPERS as a first tier member.

I certify that I have read and understand the information that accompanied this document, and I hereby elect to enroll in the State second tier retirement formula for State miscellaneous and industrial service, effective the first day of the month following receipt of my election at CalPERS. I understand that if I elect the State second tier for future service, I will not receive a refund of contributions made for service earned under the State miscellaneous or industrial 2% at 55 retirement formula while I am an active CalPERS member.

Section 2	About You	
The law requires your spouse or registered	I hereby certify under penalty of perjury that the foregoi	ng information is true and correct.
domestic partner to sign.  If you are not married	Name (First Name, Middle Initial, Last Name)	Social Security Number
or your spouse or registered domestic	Member Signature	Date (mm/dd/yy)
partner is unable to sign, complete the <i>Justification</i>	Birthdate (mm/dd/yyyy)	Daytime Phone
for Absence of Spouse's or Registered Domestic	Address	
Partner's Signature form and submit it with this Election Document.	City	State ZIP Code
Section 3	Signature of Spouse or Registered Dome	estic Partner
	Spouse or Registered Domestic Partner Printed Name	Date (mm/dd/yy)
	Spouse or Registered Domestic Partner Signature	

Mail to:

CalPERS Member Services Division • P.O. Box 942704, Sacramento, California 94229-2704

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#### BECOME A MORE INFORMED MEMBER

#### CalPERS On-Line

Visit our Web site at www.calpers.ca.gov for information on all our benefits and programs and to use our online services, including access to your personalized CalPERS information.

# Reaching Us By Phone

888 CalPERS (or 888-225-7377) (toll free) Monday to Friday, 8:00 a.m. to 5:00 p.m. TTY: For Speech & Hearing Impaired (916) 795-3240

# Seminars & Workshops

Our Financial Planning Seminars help you learn about your CalPERS benefits and the importance of financial planning.

Our Retirement Planning Workshops review your CalPERS benefits.

Our Financial Planning Seminars for Retirees help you keep your financial plan on track after you've retired.

# How to Register for Seminars & Workshops

The easiest way to register is by going to CalPERS On-Line. In the Member Information section of the Web site, look for the "Seminars, Workshops & Events" link on the left side navigation bar. You can also register by calling our Customer Contact Center at the number shown above.



# Visit Your Nearest CalPERS Regional Office

Visit the CalPERS Web site for directions to your local office.

Monday to Friday, 8:00 a.m. to 5:00 p.m.

# Fresno Regional Office

10 River Park Place East, Suite 230 Fresno, CA 93720

# Glendale Regional Office

Glendale Plaza 655 North Central Avenue, Suite 1400 Glendale, CA 91203

# Orange Regional Office

500 North State College Boulevard, Suite 750 Orange, CA 92868

# Sacramento Regional Office

400 Q Street, Room 1820 Lincoln Plaza East Sacramento, CA 95814

# San Bernardino Regional Office

650 East Hospitality Lane, Suite 330 San Bernardino, CA 92408

# San Diego Regional Office

7676 Hazard Center Drive, Suite 350 San Diego, CA 92108

# San Francisco Regional Office

301 Howard Street, Suite 2020 San Francisco, CA 94105

# San Jose Regional Office

181 Metro Drive, Suite 520 San Jose, CA 95110

# INFORMATION PRACTICES STATEMENT

The Information Practices Act of 1977 and the Federal Privacy Act require the California Public Employees' Retirement System to provide the following information to individuals who are asked to supply information. The information requested is collected pursuant to the Government Code (Sections 20000, et seq.) and will be used for administration of the CalPERS Board's duties under the California Public Employees' Retirement Law, the Social Security Act, and the Public Employees' Medical and Hospital Care Act, as the case may be. Submission of the requested information is mandatory. Failure to supply the information may result in the System being unable to perform its function regarding your status and eligibility for benefits. Portions of this information may be transferred to State and public agency employers, State Attorney General, Office of the State Controller, Teale Data Center, Franchise Tax Board, Internal Revenue Service, Workers' Compensation Appeals Board, State Compensation Insurance Fund, County District Attorneys, Social Security Administration, beneficiaries of deceased members, physicians, insurance carriers, and various vendors who prepare the microfiche or microfilm for CalPERS. Disclosure to the aforementioned entities is done in strict accordance with current statutes regarding confidentiality.

You have the right to review your membership file maintained by the System. For questions concerning your rights under the Information Practices Act of 1977, please contact the Information Coordinator, CalPERS, 400 Q Street, P.O. Box 942702, Sacramento, CA 94229-2702.



California Public Employees' Retirement System 400 Q Street Sacramento, California 95814

> 888 CalPERS (or 888-225-7377) www.calpers.ca.gov

> > PUB 52 December 2006



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